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APPLICANTS

Michael James Bleau, Grand Blanc, MI;

**** CONTINUING DATA *******

This application is a CIP of 10/205,238 07/25/2002 PAT 6,984,037 ✓

HD

**** FOREIGN APPLICATIONS *******

HD None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **. SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Examiner's Signature <i>HD</i> Initials	STATE OR COUNTRY MI	SHEETS DRAWING 13	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
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ADDRESS

051414
 GOODWIN PROCTER LLP
 PATENT ADMINISTRATOR
 EXCHANGE PLACE
 BOSTON, MA
 02109-2881

TITLE

Novel eyewear

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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